

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004968

FILED
Apr 30, 2014
Secretary of State
CC6342755948

Entity Name: HERITAGEBANK OF THE SOUTH

Current Principal Place of Business:

721 N WESTOVER BLVD
ALBANY, GA 31721

Current Mailing Address:

PO BOX 50728
ALBANY, GA 31703-0728

FEI Number: 58-0679647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWAN, SHELLEY R
1409 E SILVERSPRINGS BLVD
OCALA, FL 34470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHELLEY SWAN

04/30/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CFO
Name FOUNTAIN, THOMAS H
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31721

Title VICE CHAIRMAN, DIRECTOR
Name BURGER, JOSEPH C JR.
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31721

Title CEO, DIRECTOR
Name DORMINEY, O. LEONARD
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31721

Title CRO, DIRECTOR
Name SLAPPEY, CAROL W
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31721

Title DIRECTOR
Name MCGINLEY, DOUGLAS J
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31721

Title CHAIRMAN, DIRECTOR
Name LEHR, ANTONE D
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31703

Title DIRECTOR
Name LAND, JAMES K
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31703

Title DIRECTOR
Name STANLEY, JAMES L
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31703

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT E KRIMMEL

CAO,SVP

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CAO, SVP
Name KRIMMEL, ROBERT E
Address 721 N WESTOVER BLVD
City-State-Zip: ALBANY GA 31703